

## CT EITC Information Request Notice

CT Tax Registration No.:  
Social Security No.:  
Corr ID:  
Date:  
Tax Type:  
Period Ending:

Dear Taxpayer(s):

After reviewing the tax return for the above referenced tax type and period, it has been determined that additional information is required in order to verify the **Connecticut Earned Income Tax Credit (CT EITC)** claimed on your return.

Send this notice along with the information requested to the address listed below within **30 days** of the date of this notice. Failure to provide this information will result in the denial of the credit. If you have any questions, call 860-541-4200.

**Required information is listed below.**

### **Federal Earned Income Credit:**

You must have claimed the federal Earned Income Credit on your federal income tax return in order to qualify for the CT EITC for that tax year. Provide a copy of your federal income tax return (Form 1040, pages 1 and 2, Form 1040A, pages 1 and 2 or Form 1040EZ).

### **Information about your children:**

For every child that you reported on Schedule CT-EITC, provide the following:

- A copy of the child's birth certificate.
- A description of your relationship to the child. If you are claiming a foster child, include a copy of the decree or other court order naming you as the foster parent.
- Proof of where the child lived. Provide a letter from the child's doctor or school that includes the child's name, date of birth, address, and the name of the child's custodial parent for the tax year above.
- If you changed your address during the tax year referenced above, provide the address of each place you lived during the year.

If you claimed the CT EITC for a child who is 19 years old or older, provide one of the following:

- If the child was between the age of 19 and 24 and a full-time student, provide documentation from his or her school indicating that the child was a full-time student for the tax year above; **or**
- If the child is age 19 or older and permanently disabled, provide a letter from the child's doctor stating the child's permanent and total disability.

### **Information about your employer and your wages:**

You must prove the amount of wages you earned and taxes your employer withheld (if any) that you reported on your return. Provide your **last** paycheck stub from **each** employer that you worked for in the tax year referenced above.

If you filed a joint return, provide the last paycheck stub from each employer that your spouse worked for in the tax year referenced above.

**Paycheck stubs:**

- Be sure that your paycheck stubs show the social security number (or other number) that your employer used to report your wages and tax withheld.
- If you don't have your last paycheck stub, provide at least one stub from each employer.

**Other proof from your employer:**

If you do not have any paycheck stubs, provide a letter from each employer you worked for in the tax year referenced above. This letter should be on company letterhead and should include:

- Amount earned.
- Amount of tax your employer withheld from your paycheck.
- The name and social security number (or other number) your employer used to withhold tax and report your wages.
- The name, work address, and work phone number of the person who was responsible for payroll.

**Information about your business:**

If you were self-employed during the tax year listed above, provide the following:

- Schedule C, Profit or Loss from Business and/or Schedule F, Profit or Loss from Farming, from your federal income tax return for the tax year referenced above.
- Detailed documentation, such as sales slips, invoices, bank statements or receipts supporting your business income. Use the actual documents from the time you earned the income or incurred the expenses – estimates are not acceptable. The documentation must cover at least two months of the tax year referenced above.
- Copies of the summary documents that you used to calculate the income and expenses you reported on your tax return. These documents must cover the entire year.
- Copies of any license, registration, or certification that are required for your business (taxicab, cosmetology, health or food service, etc.).
- A completed **Form CT-EITC SEQ**, *Earned Income Tax Credit Self-Employed Questionnaire*, which is available from the DRS website at [www.ct.gov/DRS/CTEITCQuestionnaire](http://www.ct.gov/DRS/CTEITCQuestionnaire).
- If self-employment income was from your business activity as a partner or shareholder of a partnership or S Corporation, provide your federal Schedule K-1(s).

Due to the large number of taxpayers expected to claim this credit, the CT EITC review process may take up to **90 days**. Any overpayment not related to this credit will be issued separately and will not be delayed while your claim is processed.

**Department of Revenue Services  
State of Connecticut  
P.O. Box 2980  
Hartford, CT 06106-2980**

For a faster refund, file your return electronically at [www.ct.gov/DRS](http://www.ct.gov/DRS) and choose direct deposit.